	_				<u>.</u>				101	<u>۱</u> ۷	1,219	i	
PATENT APPLICATION FEE DETERMINATION RECOF								Application or Docket Number					
	PATENT		ON FEE D live Octob			ON RECO	RD		PRC-	-6	44		7
	•	CLAIMS A	S FILED - (Column			mn 2)		SMALL E	MITTY	OR	OTHEF SMALL		10.
TOTAL CLAIMS			31				RAT		FEE	7	RATE	FEE	19
FOR •			NUMBER FILED		NUMBER EXTRA			BASIC FE	385.00	OR	BASIC FEE	770.00	ŀ
TOTAL CHARGEABLE CLAIMS			3/ minus 20=		• 11			X\$ 9=	99	OR	X\$18=		1
INDEPENDENT CLAIMS			minus 3'=		2			X43=	 / 	┪┈	X86=		1
ML	LTIPLE DEPEN	IDENT CLAIM P				·	7100	80	OR	1.00-	-	1	
		in and one of in	lees these st		*****	returns 0	'	+145=		OR	+290=		1
• II		in column 1 is						TOTAL	570	OR	TOTAL	311	4
	Ç	LAIMS AS A (Column 1)	MENDE	(Colur	ກດ 2)	(Column 3)		SMALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A	6.28.04	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	: 31	Minus	- E	31	.0		X\$ 9=		OR	X\$18=		
ME	Independent	• 5	Minus	200	5			X43=	13	OR	X86=	, :	1
٩	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDENT	CLAIM		l	+145=		1	+290=		1
	/ /	1		÷			Į	TOTAL		OR	TOTAL		ł
	112411	Pravi e e inc		(0 - 1	·	40 ab 81	A	ODIT. FEE	<u></u>	OR	ADDIT. FEE	L	ł
\dashv	#^ <i> </i>	(Column 1)		(Colun		(Column 3)) r		ADDI-	1		ADDI-	ł
AMENOMENT B		REMAINING AFTER AMENDMENT		PREVICE PAID	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL	
	Total	· 19 .	Minus	-3	/	=		X\$ 9=		OR	X\$18=		ı
	Independent	• / /	Minus	()		•/ .	lt	X43=		OR	X86=		1
	FIRST PRESE	NTATIÓN OF MI	ULTIPLE DEF	PENDENT	CLAIM		!	. 4 4 5			. 200		1
							L	+145=		OR	+290=	•	ł
		•				•	A	DOIT. FEE		OR	ADDIT. FEE		Į
- ,		(Column 1)		(Colun		(Column 3)	·		·				1
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUME PREVIO PAID I	SER NUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
₹ Ş	Total	•	Minus	44		2		X\$ 9=		OR	X\$18=	,	
	independent	•	Minus	404		æ	 	X43=	·		X86=		
۷	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	7,700		OR			1
		•	•	•				+145=		OR	+290=		•
~!	the Highest Nur	nn 1 is less than th nber Previously Pa	id For IN THE	S SPACE IS	less the	n 20, enter "20.	- A	TOTAL DOIT, FEE	•	OR	TOTAL ADDIT, FEE		1
		inber Previously Pa ber Previously Pai							propriate box	ı in col	umn 1.	• .	ı

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